OIPE 47 2006 W

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TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Application Number	10/721,766	
Filing Date	November 25, 2003	
First Named Inventor	Marco Viti	
Art Unit	2837	
Examiner Name	Robert Wayne Horn	
Attorney Docket No.	856063.749	

ENCLOSURES (check all that apply)								
Extension of T Express Abance Request Information Discontinuous Statement and Cited Reference Certified Copy Document(s) Response to M under 37 CFR Response to M	al Form ned esponse declaration(s) ime Request donment sclosure Transmittal ces of Priority dissing Parts 1.52 or 1.53		Drawing(s) Request for Corrected Fire Receipt Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation, Change of Correspondence Address Declaration Statement under 37 CFR 3.73(b) Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on	illing s	A C A C A C A C C C	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to BC (Appeal Notice, Brief, Reply Brief) Proprietary Information Betatus Letter Return Receipt Postcard Other Enclosure(s) (please Bentify below):		
Remarks		<u> </u>						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Name Seed Intellec		tural Property Law Group PLLC		_C	Customer Number 38106			
Signature	Signature							
Printed Name Harold H. Bennett II								
Timed Hame	Harolu H. Bei	mict	LH /					
Date	March 27, 20			Reg. No.		52,404		
	March 27, 20	06	R		INIC	52,404		
Date I hereby certify the with the United St	March 27, 20 CERT at this correspo	06 IFIC nder		N/MAIL nsmitted	to t ass	he USPTO or deposited mail in an envelope		
I hereby certify the with the United St addressed to: Co	March 27, 20 CERT at this correspo	06 IFIC nder	ATE OF TRANSMISSIOnce is being facsimile transwith sufficient postage a	N/MAIL nsmitted	to t ass	he USPTO or deposited mail in an envelope		
I hereby certify the with the United St addressed to: Co shown below.	CERT at this correspo ates Postal Ser mmissioner for	06 IFIC nder	ATE OF TRANSMISSIOnce is being facsimile transwith sufficient postage a	DN/MAIL nsmitted as first cla exandria,	to t ass	he USPTO or deposited mail in an envelope		

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 762984_1.DOC

					Complete if Known					
Foos pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).			Application	Application Number 10/721,766						
FEE TRANSMITTAL			Filing Date	Filing Date		November 25, 2003				
for EV 2006			First Named	First Named Inventor		Marco Viti				
MAR 2 7 2006 &	R 2 7 2006 & TOFFY 2006			Examiner N	Examiner Name		Robert Wayne Horn			
	Applicant plaims small entity status. See 37 CFR 1.27			Art Unit	Art Unit		2837			
TOTAL MOUNT C	TOTAL SHOUNT OF PAYMENT (\$)830				Attorney Docket No. 856063.749					
METHOD OF PAYN	/IENT (check al	ll that apply)								
X Check Cre	X Check ☐ Credit Card ☐ Money Order ☐ Other (please identify):									
Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
	e(s) indicated t			Charge fee(
	y additional fe	• •			underpayn	nents or credit	any ove	erpayments		
Warning: Information information and author		y become publ		information should	d not be inclu	ided on this for	m. Provid	le credit card		
FEE CALCULATIO			lue upon filir	ng or may be si	ubiect to a	surcharge.)				
				-g -:a,						
	1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH			CH FEES	FEES EXAMINATION FEES					
		Small Enti	ty	Small Entity	<u>.</u>	Small Entity				
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fe</u>	es Paid (\$)		
Utility	300	150	500	250	200	100		· · ·		
Design	200	100	100	50	130	65				
Provisional	200	100	0	0	Ó	0				
2. EXCESS CLAIM	FEES							Small Entity		
Fee Description						<u>i</u>	-ee (\$)	<u>Fee (\$)</u>		
Each claim over 20 (i	ncluding Reissu	ues)					50	25		
Each independent cla	aim over 3 (inclu	uding Reissue	es)				200	100		
Multiple dependent c	laims						360	180		
Total Claims	Total Claims		Fee Paid	Fee Paid (\$)		Multiple Dependent Claims				
20 -20 or HF) = <u>0</u>	X	<u>50</u>	= <u>0</u>		Fee (\$)	<u>E</u>	ee Paid (\$)		
HP = highest number	er of total claim	ns paid for, if	greater than 2	20						
Indep. Claims	Extra Cla	aims	Fee (\$)	Fee Paid	<u>(\$)</u>					
<u>5</u> -3 or HP	= <u>1</u>	X	<u>200</u>	= <u>200</u>						
HP = highest number	er of independe	ent claims pa	id for, if great	er than 3						
3. APPLICATION S										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets	Extra Shee	ets <u>Nur</u>	mber of each	additional 50 c	or fraction (thereof Fe	e (\$)	Fee Paid (\$)		
-100 =		/50 =	(round	up to a whole ու	umber)	х				
4. OTHER FEE(S)								Fees Paid (\$)		
Non-English Specifi	cation, \$130 fe	e (no small e	ntity discount	:)						
Other (e.g., late filing	g surcharge):	Petition for	Extension of	Time (2 mos.)				<u>450</u>		
Submission of Information Disclosure Statement Fee 180										
SUBMITTED BY / /										
Signature	1/-	-//		gistration No. torney/Agent)	52,404	Telephone	206-62	2-4900		
Name (Print/Type) Harold H. Bennett II						Date	Date March 27, 2006			